

A nighttime photograph of the Minneapolis skyline across a river, with a bridge in the foreground. The city lights are reflected in the water, and the sky is dark with some clouds. The text is overlaid on the image in a large, white, sans-serif font.

City of Minneapolis 911/MPD Workgroup Final Recommendations

Public Health & Safety Committee

Presented by the Office of Performance & Innovation

November 5, 2020

Agenda for today



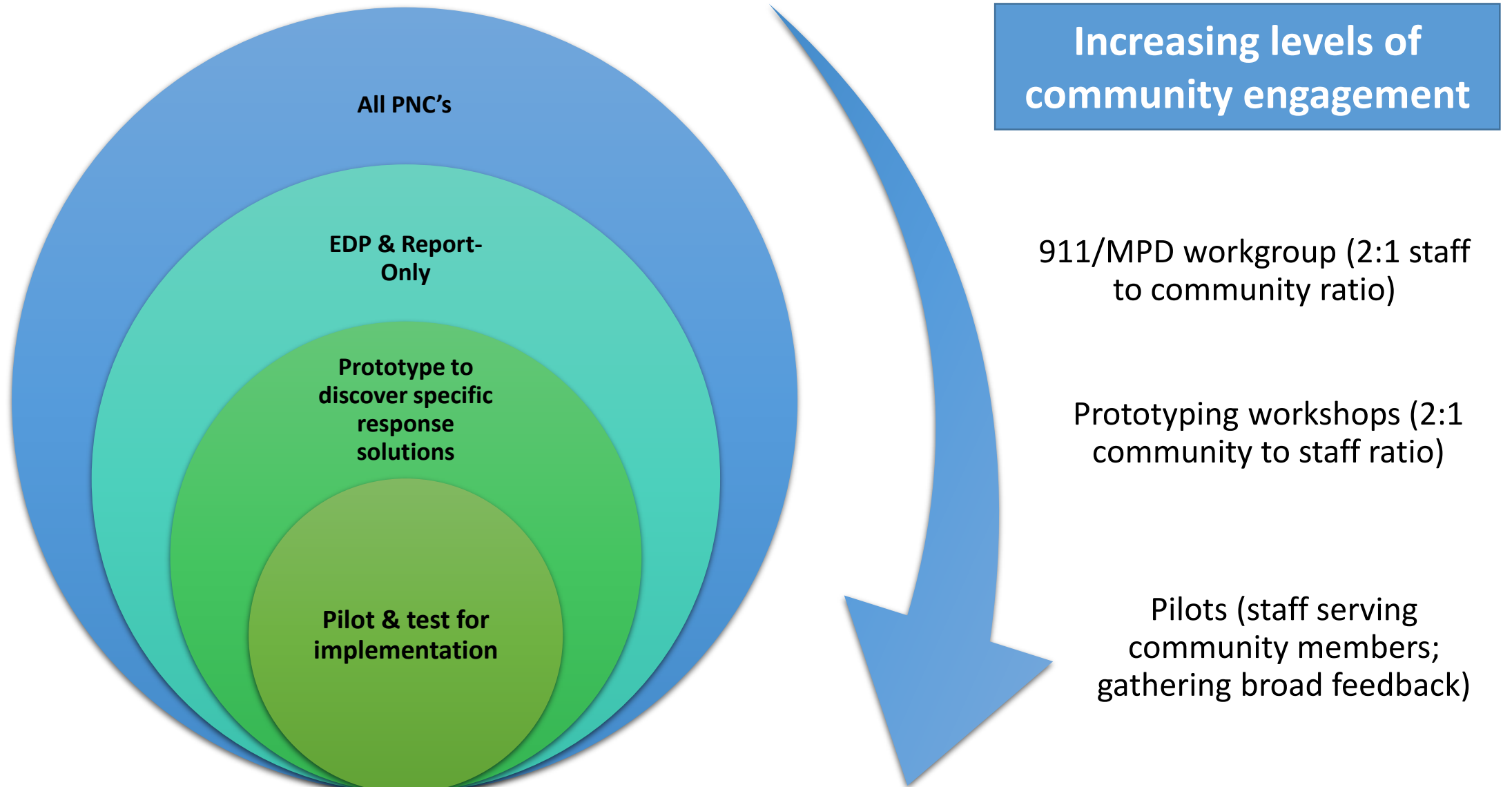
- 1. Background**
- 2. Survey results**
- 3. Recommendations**
 - 1. Community-centered workshops**
 - 2. Mental health recommendations**
 - 3. Reporting recommendations**
- 4. Appendix**
 - 1. REIA**





Background

Process overview

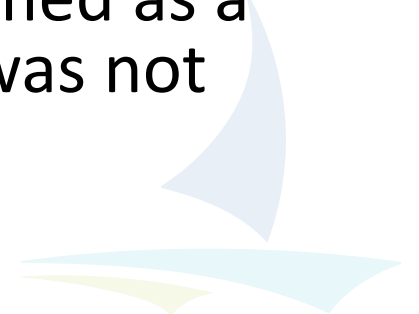




Survey Results

Key findings

- Across both surveys, many respondents expressed that they called 911 for help, even though they were uncomfortable with it. For many, the discomfort comes from the association of police response when it is not wanted.
- Excellent customer service and empathetic treatment are desired, regardless of incident type.
- Autonomy was a major theme. Respondents want a choice in the type of response they receive.
- Protection of self or others, particularly BIPOC, was identified as a reason that issues were not reported or police presence was not desired when reporting.



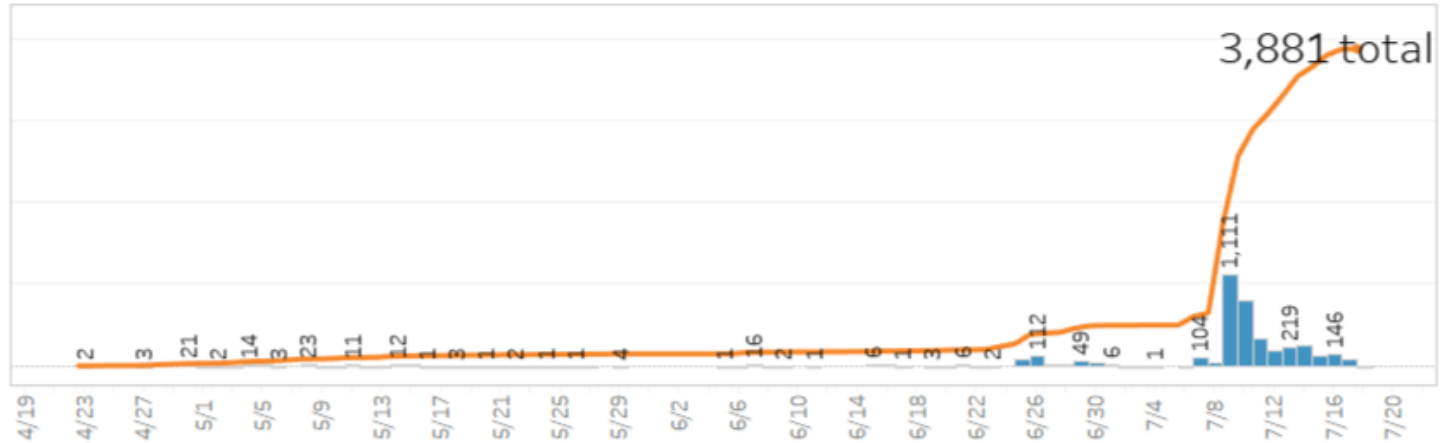
Overview

- Survey engagement
 - OPI analyzed 8,012 total survey responses
 - OPI partnered with Communications and local organizations to spread awareness on social media for the survey.
 - Survey was available in 4 languages: English, Hmong, Spanish, and Somali
- Survey analysis
 - OPI analyzed a total of 23,551 individual open-ended survey responses to qualitative questions
 - Report-only included 11,574 open-ended responses
 - Mental Health included 11,977 open-ended responses

Alternative Responses to Mental Health Crisis Survey

Survey Respondents by Date Submitted

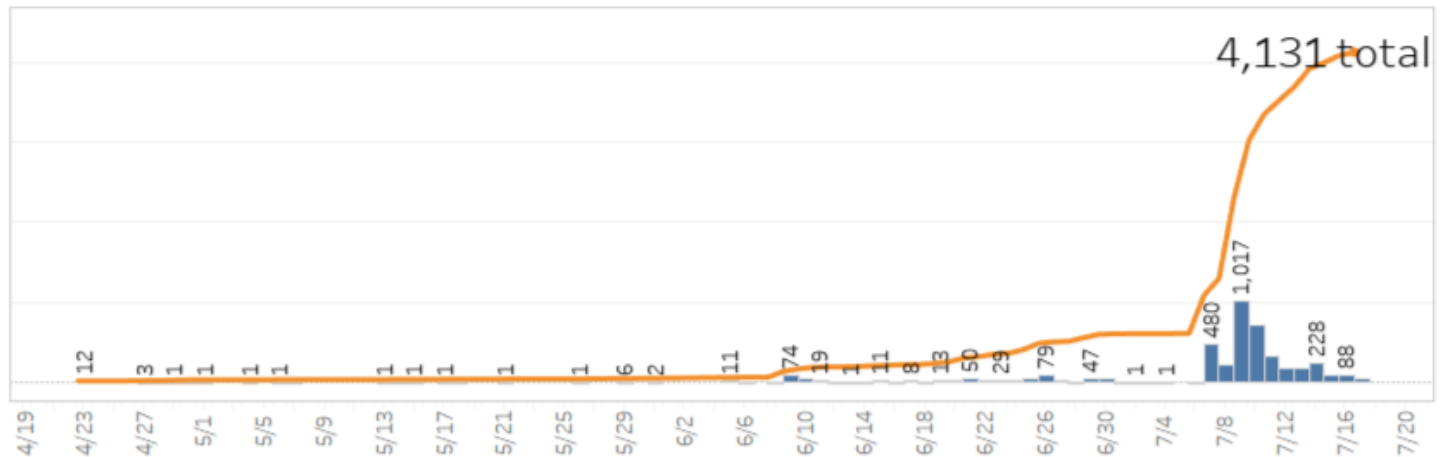
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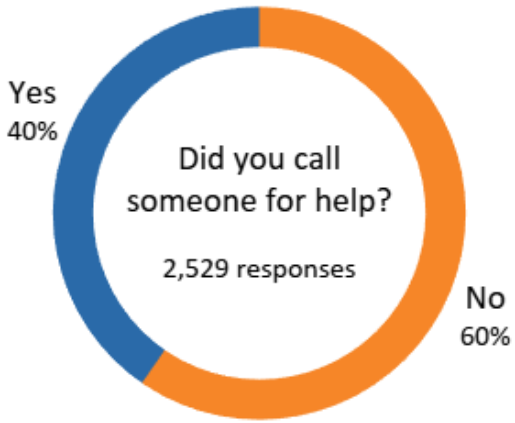


Reporting Non-Emergency Crimes Survey Results

Survey Respondents by Date Submitted

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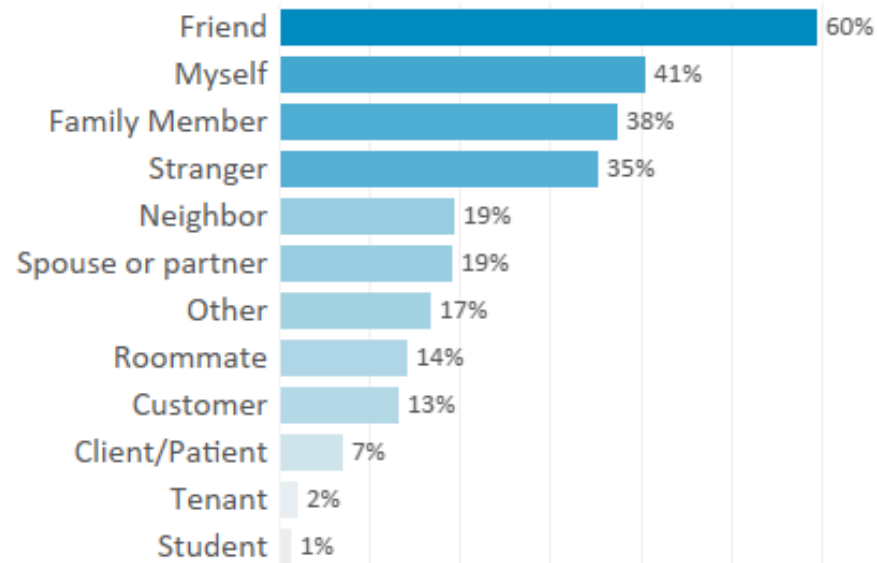


Mental Health Crisis Survey

The purpose of this survey was to help the City of Minneapolis gather information on people's experiences with mental health support services during a crisis.

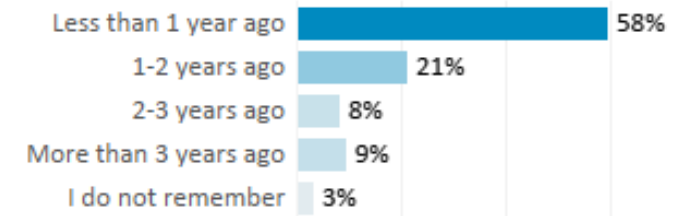
Which of the following people in your life has experienced a mental health crisis?

Note: respondents were allowed to select more than 1 answer
n = 2,738 respondents



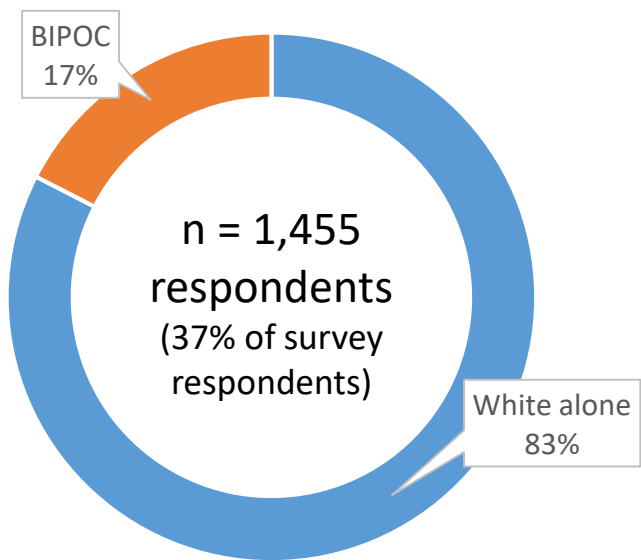
How long ago was the most recent mental health crisis you experienced?

n = 2,546 respondents



Demographics

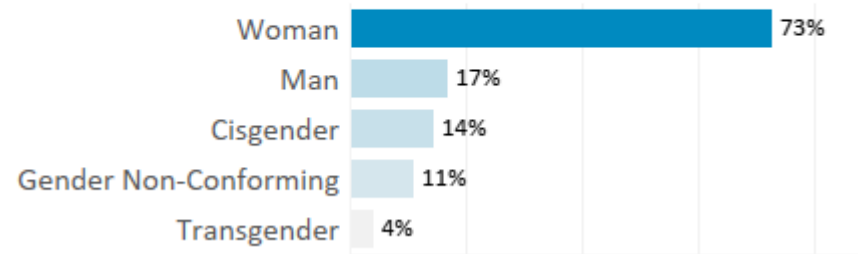
Race or Ethnicity Group



Race or Ethnicity Identity Breakdown	Count of Responses
Note: respondents may select more than 1 answer	
American Indian or Alaska Native	32
Asian	63
Black or African American	71
Hispanic, Latino, or Spanish origin	59
Another race or ethnicity not listed	58
White	1302
Multiracial (respondent selected more than 1 answer)	124

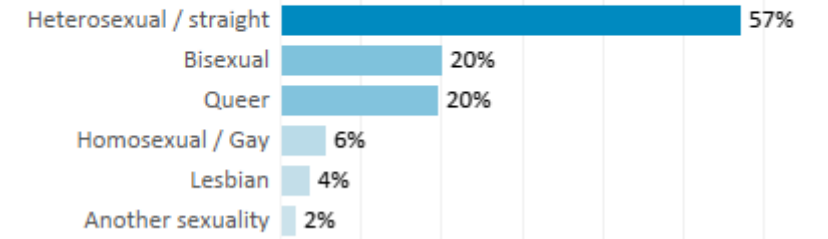
Gender Identity

Note: respondents were allowed to select more than 1 answer
n = 1,506 respondents (39% of all survey respondents)



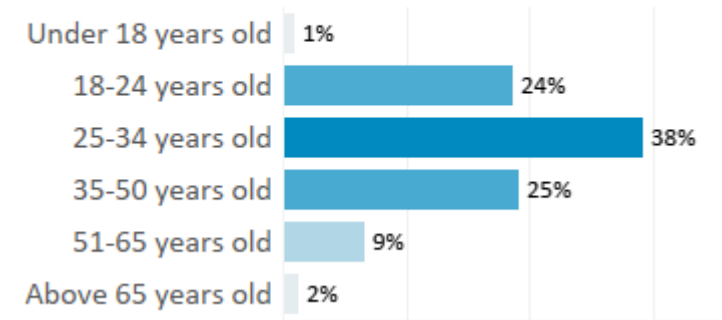
Sexual Identity

Note: respondents were allowed to select more than 1 answer
n = 1,477 respondents (38% of all survey respondents)



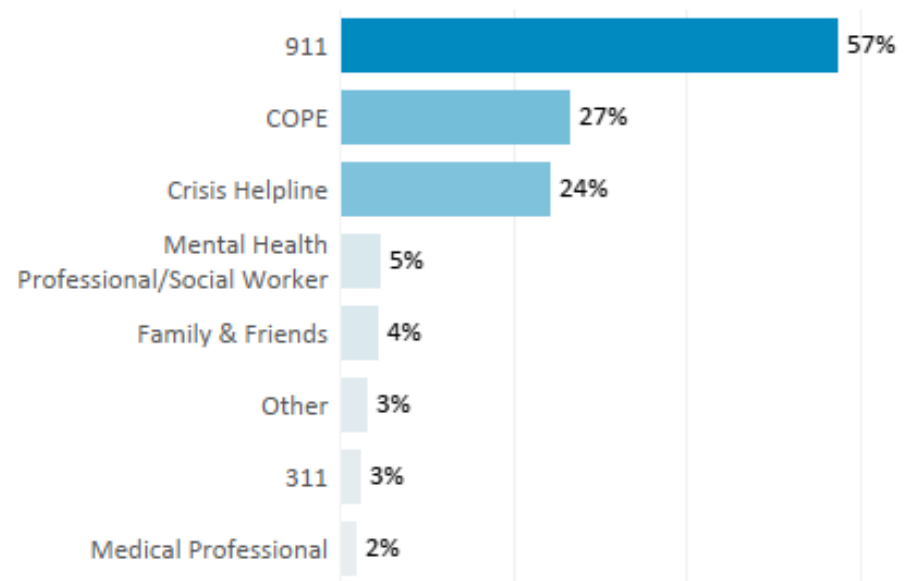
Age Group

n = 1,519 respondents (39% of all survey respondents)



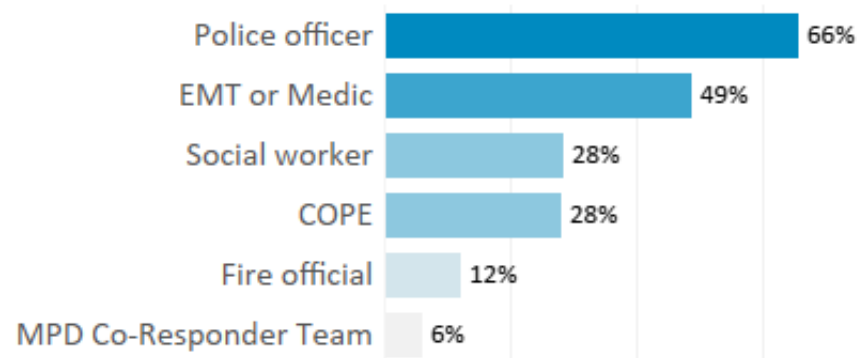
Who did you call for help?

Note: respondents were allowed to select more than 1 answer
n = 1,009 respondents

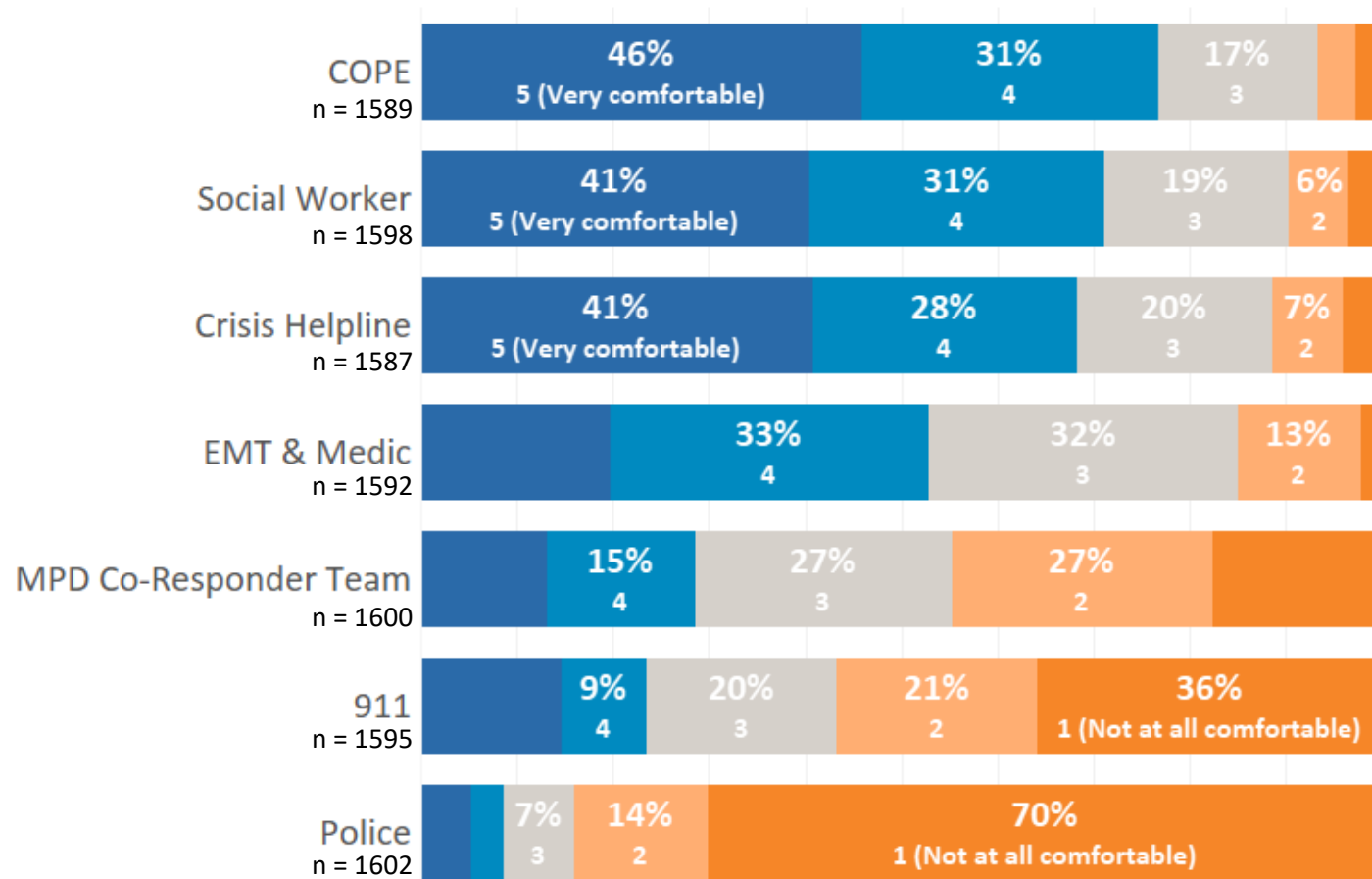


Which of the following responders have you interacted with during a mental health crisis?

Note: respondents were allowed to select more than 1 answer
n = 1,317 respondents

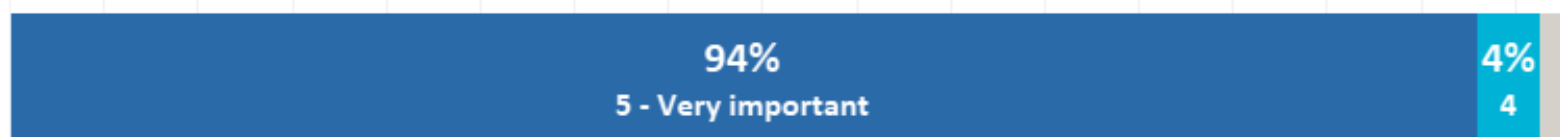


Rating level comfort with response and reporting options

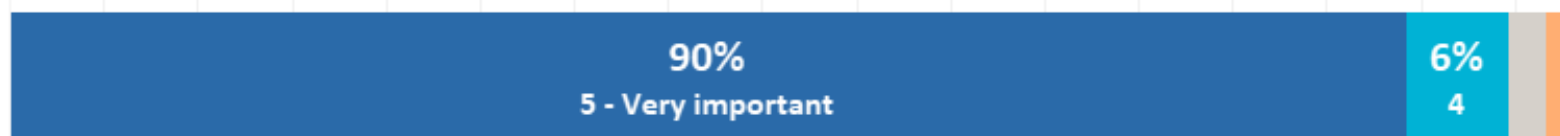


Rating of Importance for Aspects of a Mental Health Response

The way responders treat people who are experiencing a crisis
n = 1658



The sense of safety felt by the person experiencing a mental health crisis
n = 1660



The speed of responders' arrival to help in a crisis
n = 1659



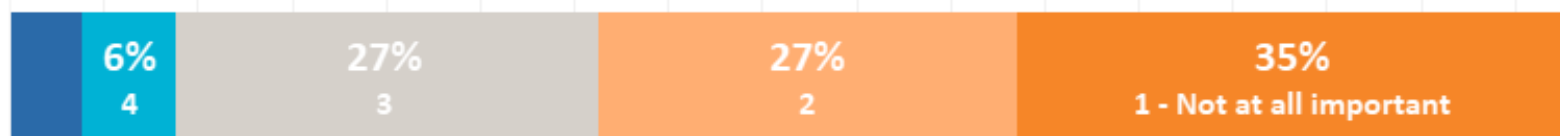
Personal follow-up given to people by responders after a crisis
n = 1659



Responders wearing regular clothes when arriving to help in a crisis
n = 1658



Responders wearing uniforms when arriving to help in a crisis
n = 1658



Responders having a weapon (such as a gun or taser) when arriving to help in a crisis
n = 1655

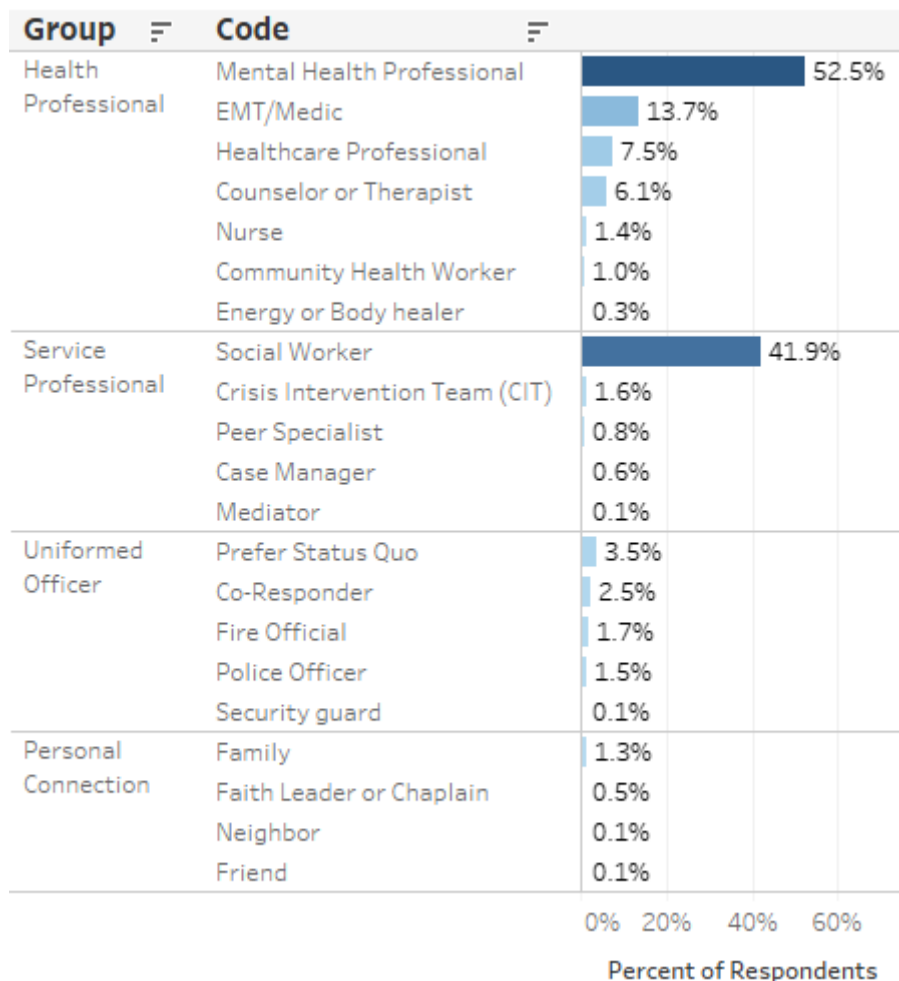


Instead of police, who would you like to respond when you are experiencing or witnessing a mental health crisis?

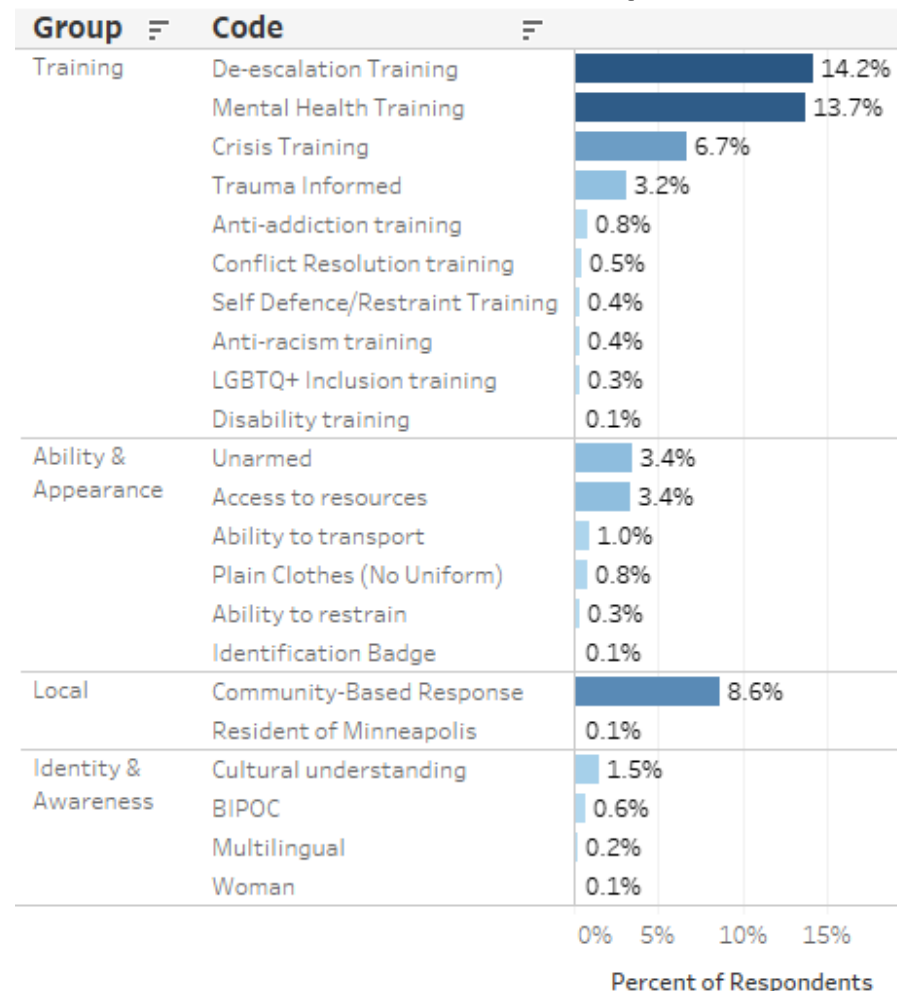
n = 1,551 respondents (40% of all survey respondents)

Note: each respondents may have indicated more than 1 code in their response

Profession of Responder




Characteristics of Responder



Reporting Non-Emergency Crimes

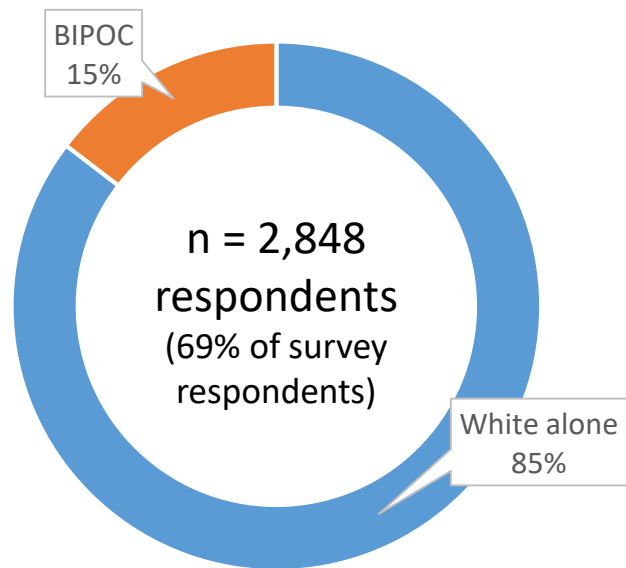
Purpose of this survey was to help the City of Minneapolis gather information on people's experiences reporting non-emergency crimes. Results of the survey will be used to identify areas for improvement for service delivery for the residents and visitors of Minneapolis.

We focused on 3 types of non-emergency crimes

- **Non-violent theft** (ex: stolen bike, items stolen out of garage, etc.)
 - **Property damage** (ex: graffiti on your property, broken car window, etc.)
 - **Parking or traffic issues** (ex: unknown vehicle parked, obstruction in the street, etc.)
- 
- A large yellow right-angled triangle is positioned in the bottom right corner of the slide, pointing towards the top right.

Demographics

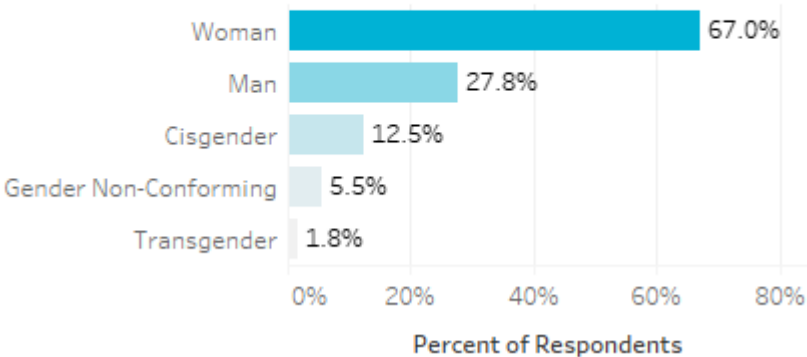
Race or Ethnicity Group



Race or Ethnicity Identity Breakdown	Count of Responses
Note: respondents may select more than 1 answer	
American Indian or Alaska Native	41
Asian	97
Black or African American	121
Hispanic, Latino, or Spanish origin	108
Another race or ethnicity not listed	178
White	2577
Multiracial (respondent selected more than 1 answer)	205

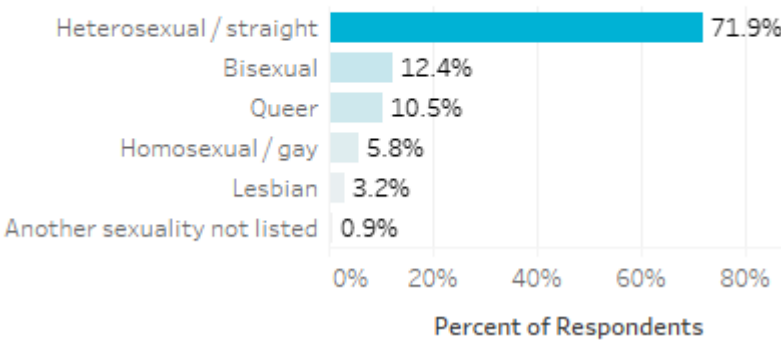
Gender Identity

Note: respondents were allowed to select more than 1 answer
n = 2,926 respondents (71% of all survey respondents)



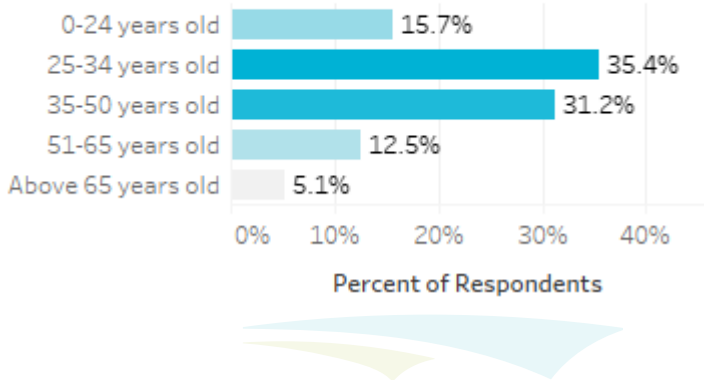
Sexual Identity

Note: respondents were allowed to select more than 1 answer
n = 2,810 respondents (68% of all survey respondents)

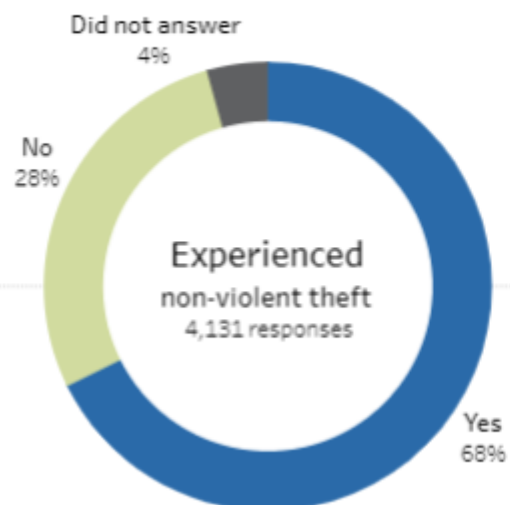


Age Group

n = 2,957 respondents (72% of all survey respondents)



NON-VIOLENT THEFT



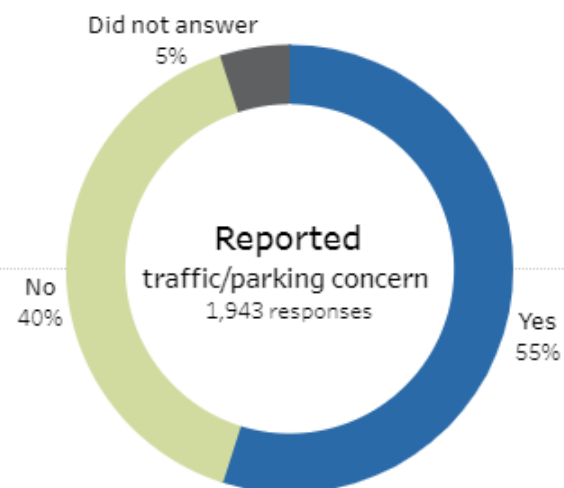
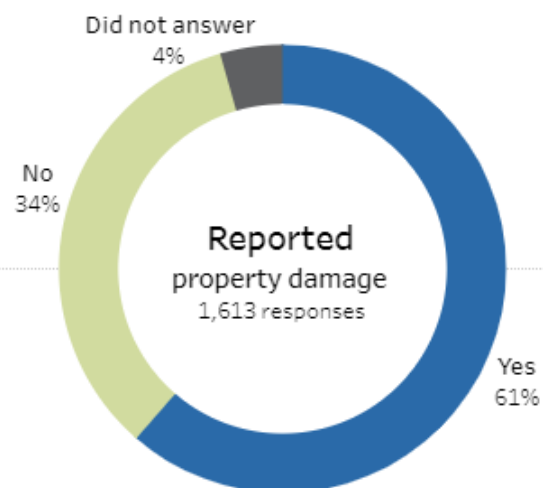
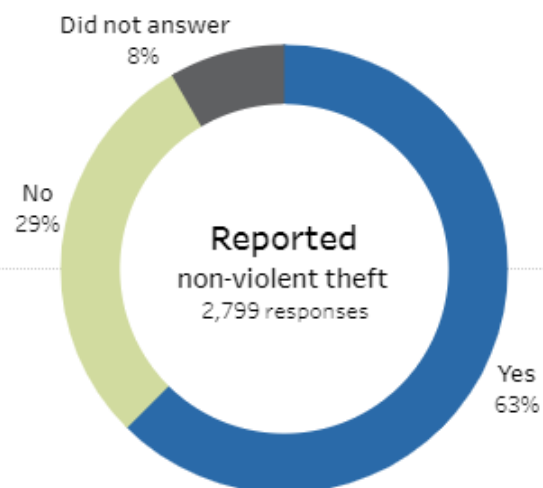
PROPERTY DAMAGE

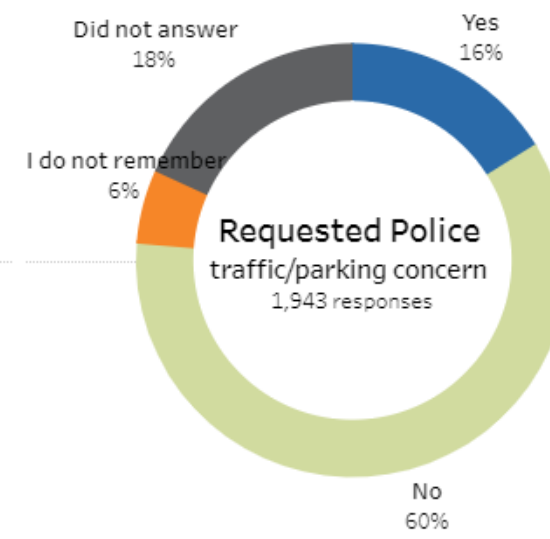
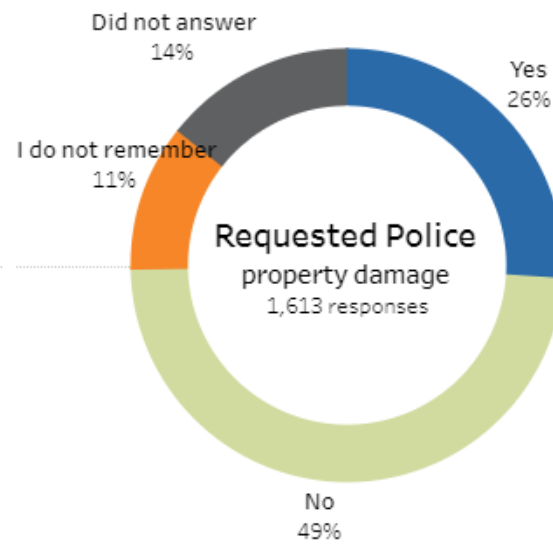
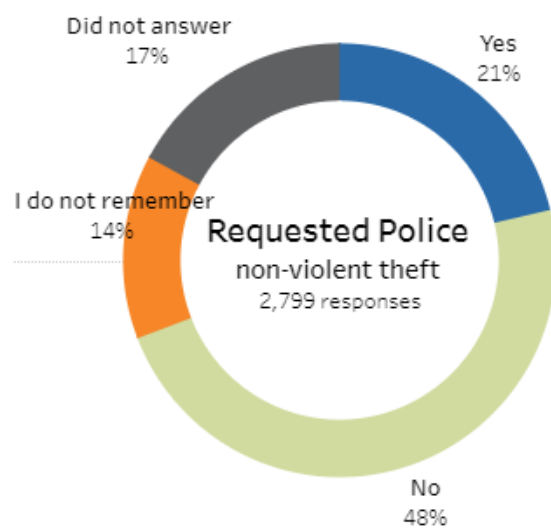


TRAFFIC OR PARKING CONCERN



Of those who answered YES to experiencing the non-violent crime...



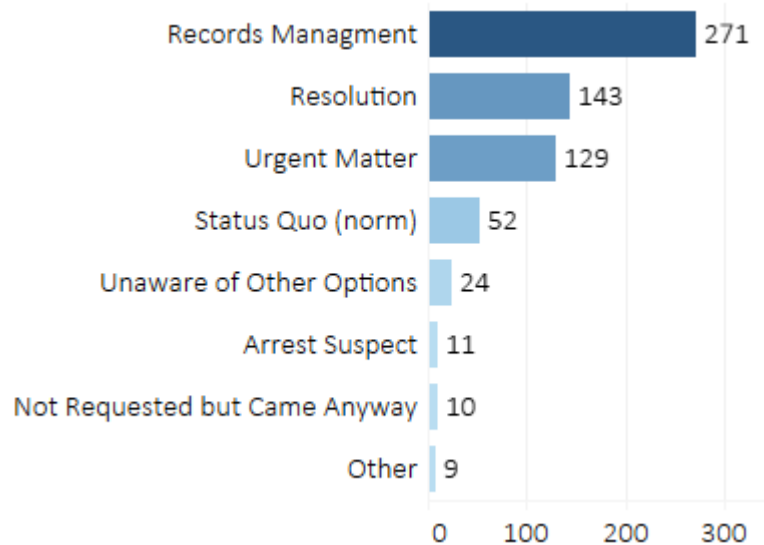


Please explain why you requested police presence.

Note: each respondents may have indicated more than 1 code in their response

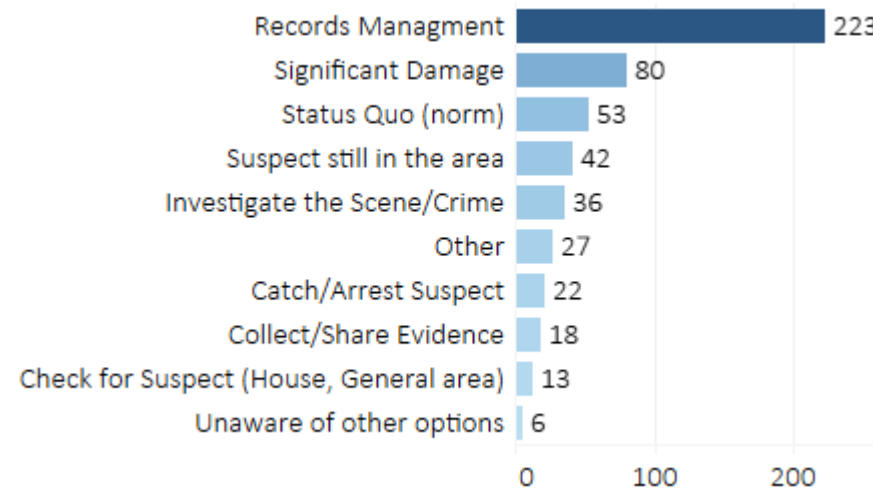
Non-violent theft

n = 571 respondents (13% of all survey respondents)



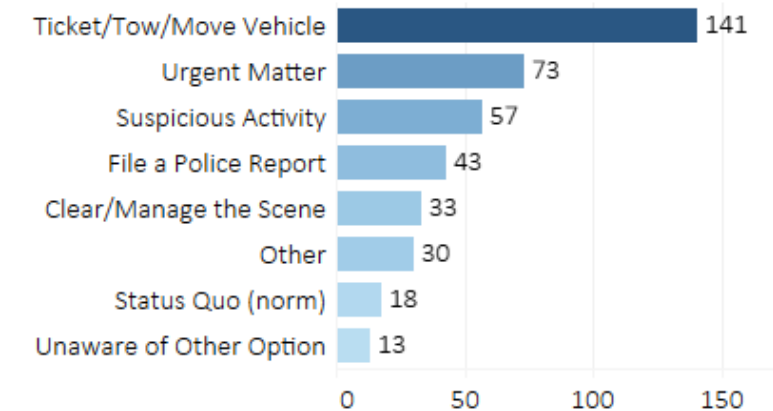
Property damage

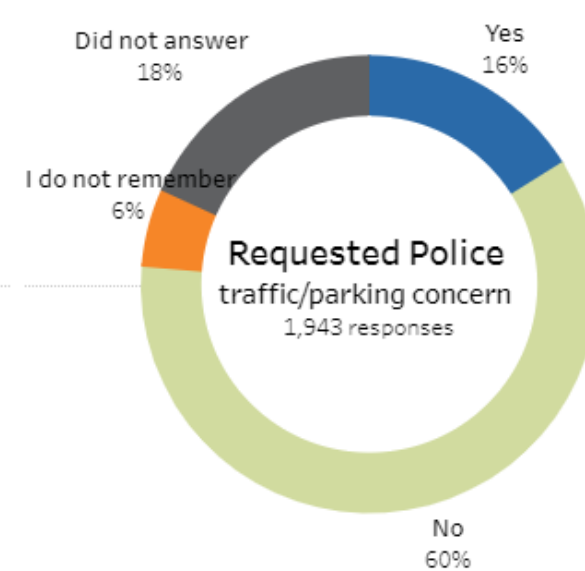
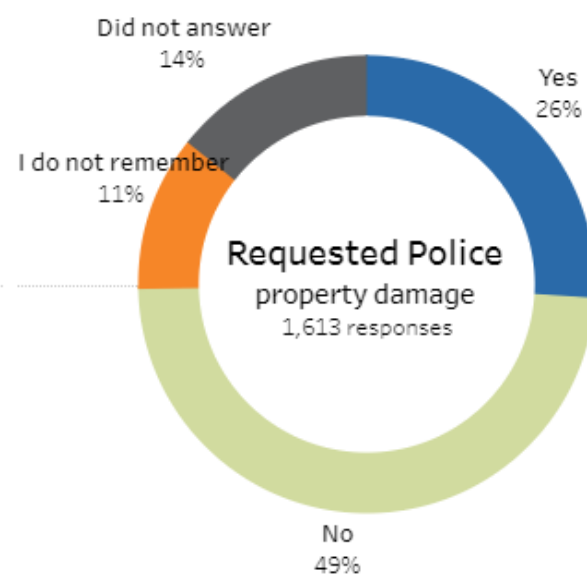
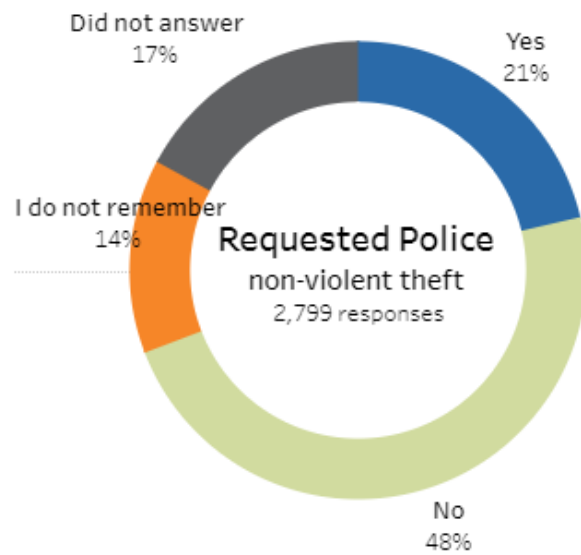
n = 395 respondents (9% of all survey respondents)



Traffic/parking concern

n = 297 respondents (7% of all survey respondents)



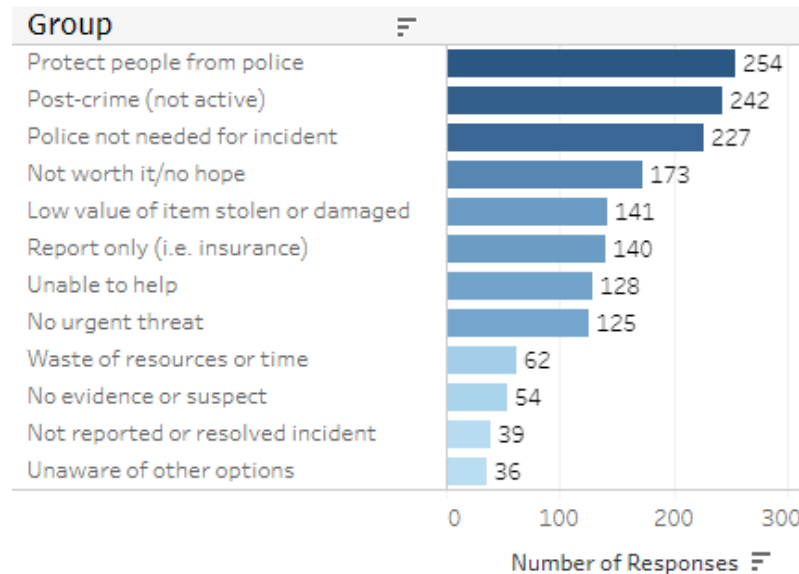


Please explain why you did NOT request police presence.

Note: each respondents may have indicated more than 1 code in their response

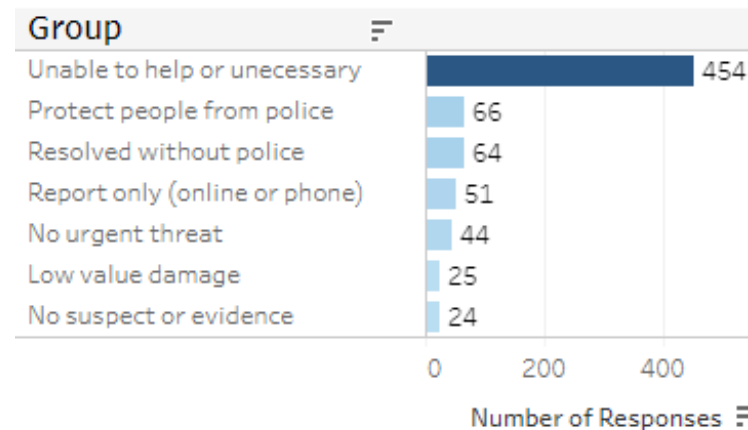
Non-violent theft

n = 1,249 respondents (30% of all survey respondents)



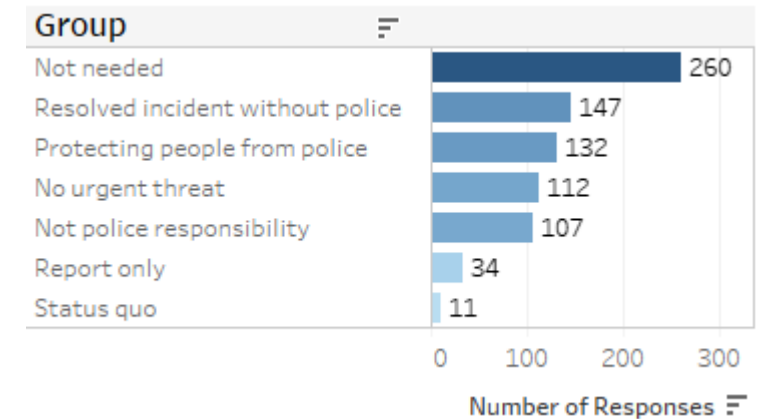
Property damage

n = 710 respondents (16% of all survey respondents)

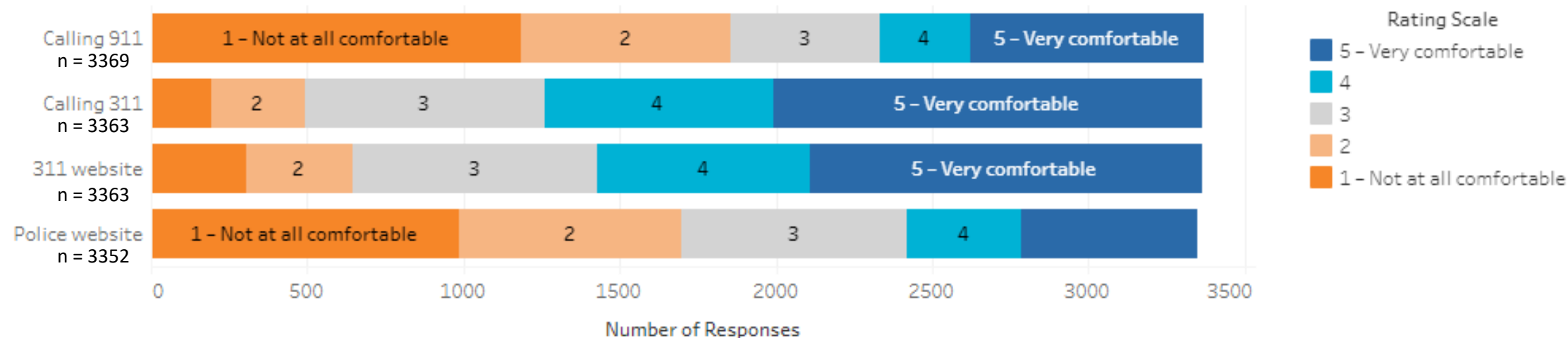


Traffic/parking concern

n = 1,033 respondents (24% of all survey respondents)



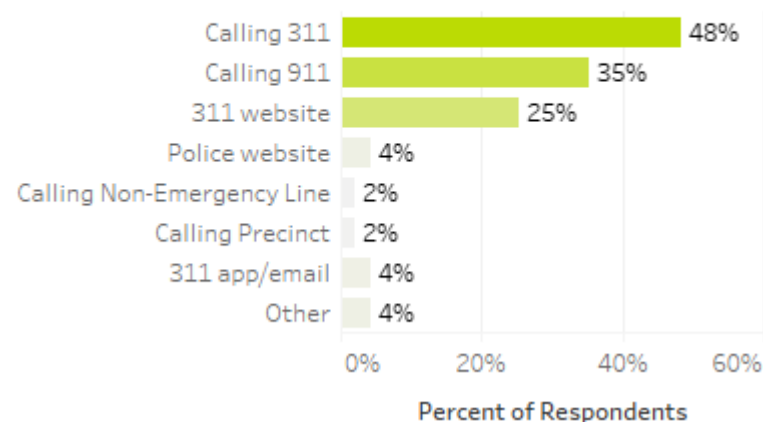
Please rate your level of comfort for the following service options.



How did you report this incident?

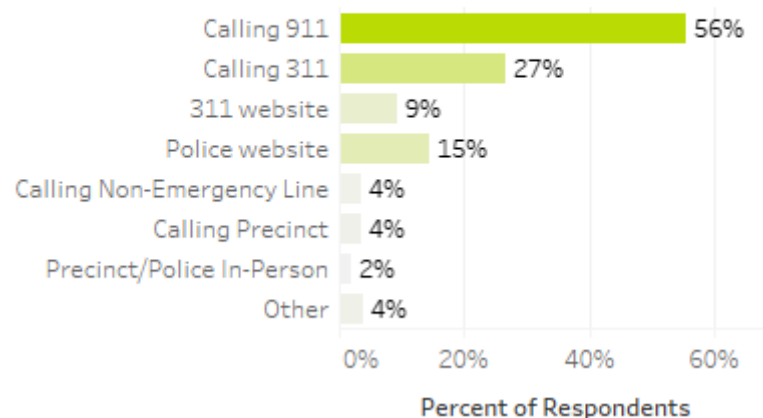
Traffic or Parking Concern

Note: respondents were allowed to select more than 1 answer
n = 1,063 respondents (26% of all survey respondents)



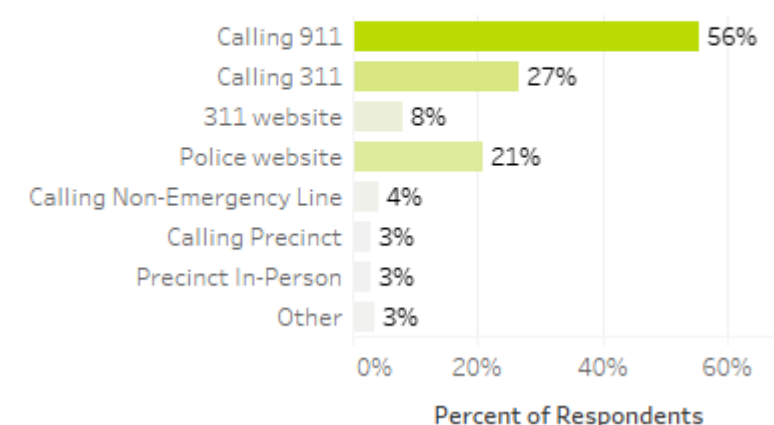
Property Damage

Note: respondents were allowed to select more than 1 answer
n = 988 respondents (24% of all survey respondents)



Non-Violent Theft

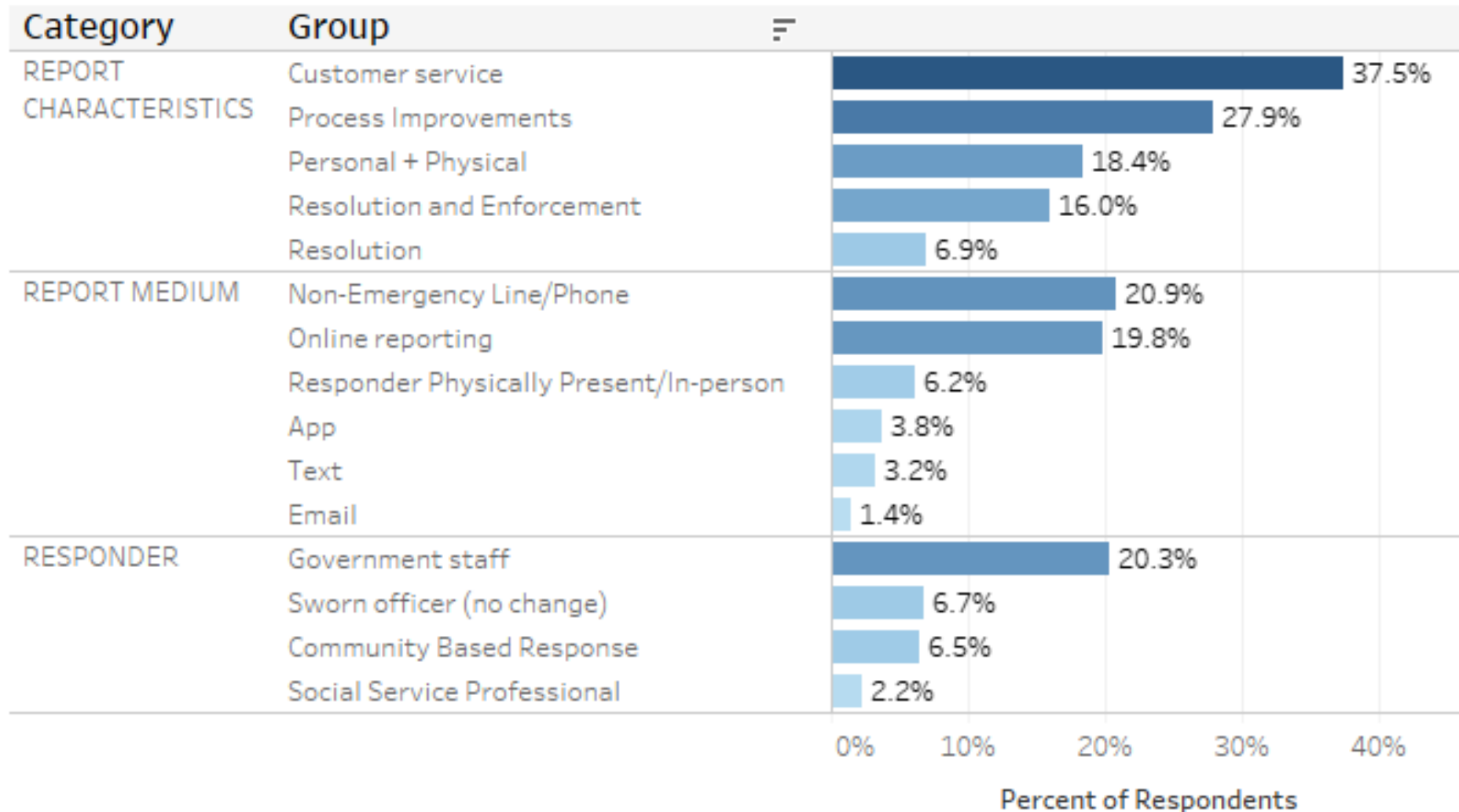
Note: respondents were allowed to select more than 1 answer
n = 1,751 respondents (42% of all survey respondents)



What would the ideal reporting experience look like if you could not report to a sworn officer in Minneapolis?

n = 2,662 respondents (64% of all survey respondents)

Note: each respondents may have indicated more than 1 code in their response



Takeaways + Conclusions

Mental Health Survey

- Majority of people do not call the City of Minneapolis when experiencing or witnessing a mental health crisis
- People have a close relationship with the person in crisis (family, friend, self).
- People call 911 and interact with police during a crisis despite very low levels of comfort for each.
- Fewer people interact with mental health professionals or social workers despite very high levels of comfort for each.
- People value being treated with respect, sense of safety, and quick response times when experiencing or witnessing a mental health crisis.
- Majority of people prefer a mental health professional or social worker who have de-escalation and mental health training to respond to a mental health crisis.

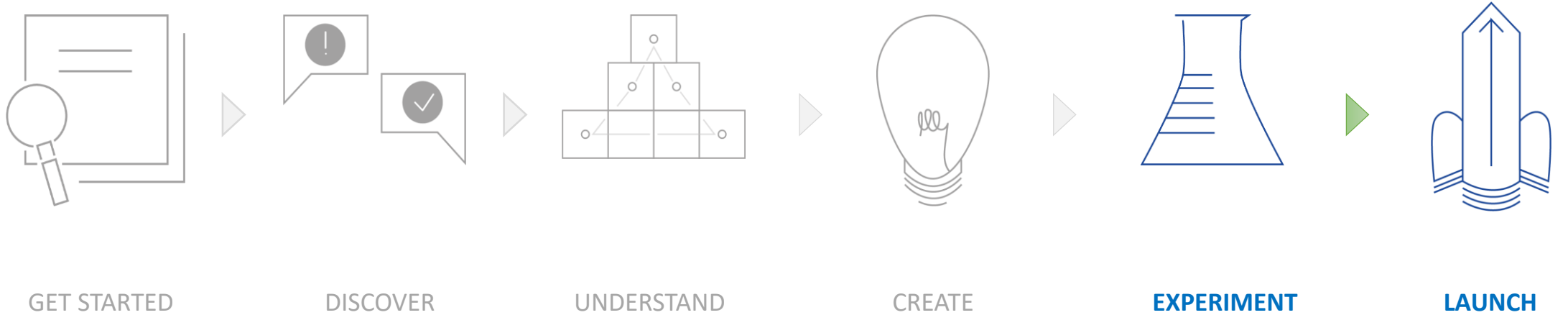
Non-Emergency Crimes Survey

- Regardless of crime type:
 - Majority of people who experience a crime report the incident to the city.
 - Majority do not request police presence because police make them feel unsafe, are unhelpful in resolving the situation, or unnecessary for the type of incident.
 - Fewer people report crimes via 311 online options despite high levels of comfort with reporting option.
- Majority of people reporting property damage or non-violent theft contact 911 whereas majority of people reporting traffic or parking concern contact 311.
- People value a customer service approach that does not include a sworn officer response when reporting their non-emergency crime to the city.



Mental Health Recommendations

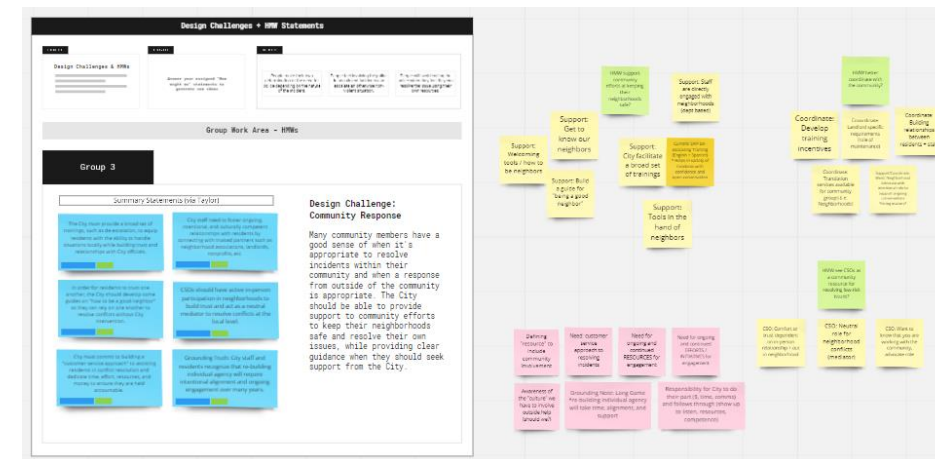
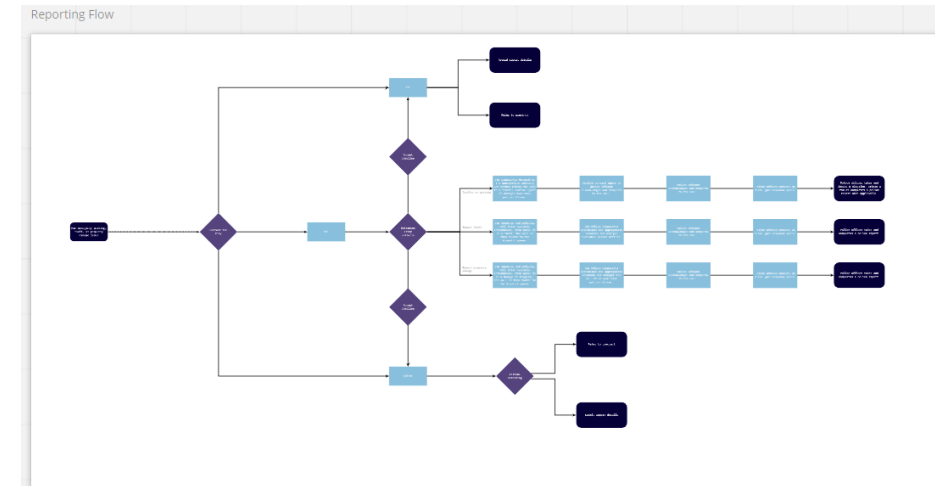
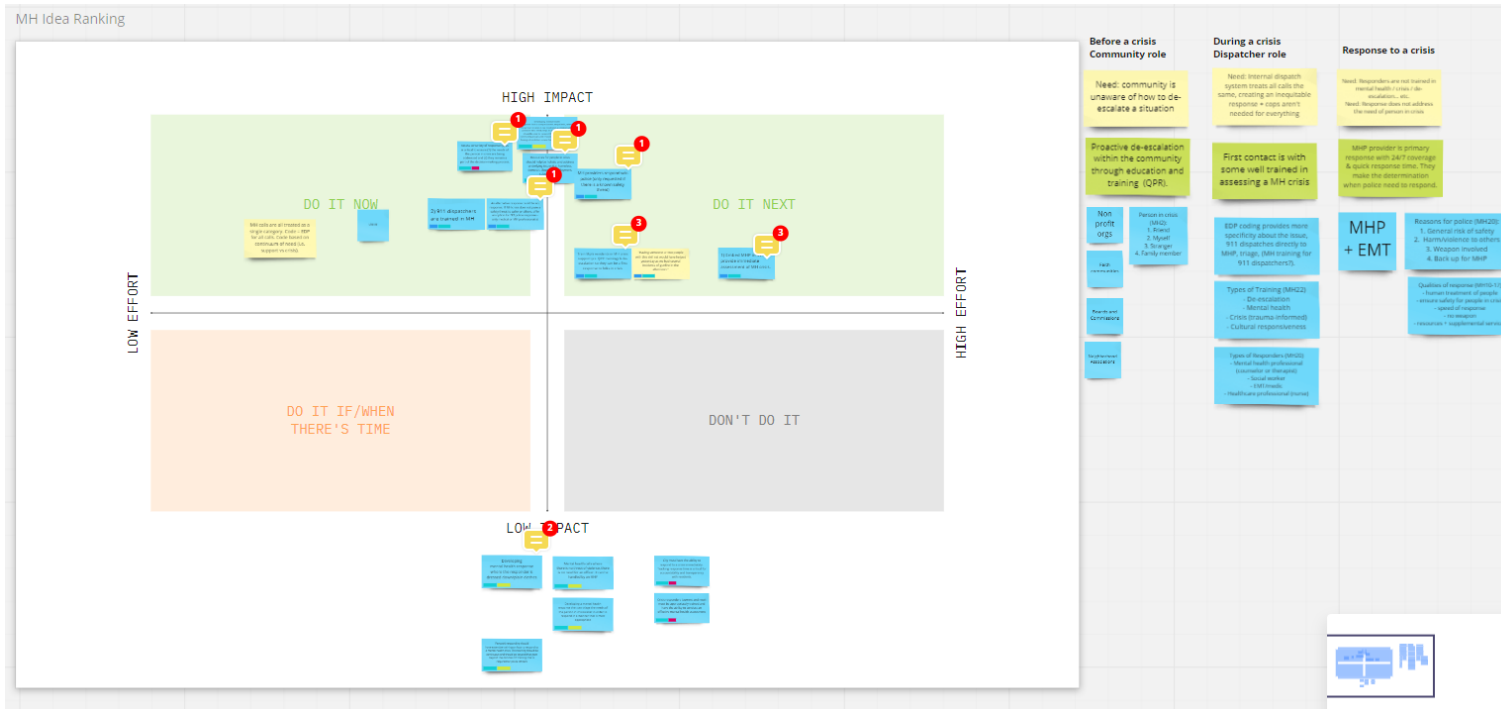
Inclusive Design: Where we're at



- Ready to pilot several ideas
- Some ideas could move towards implementation
- After pilots, evaluate to determine which ideas should move to full-scale implementation

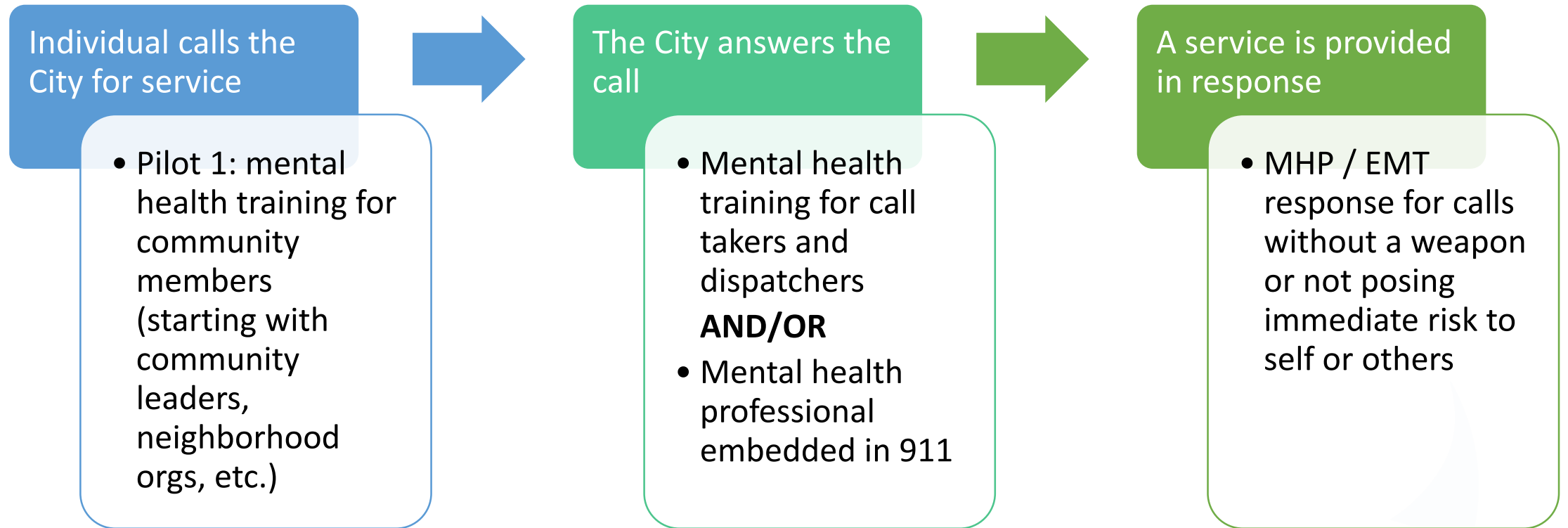
Community-centered workshops

- Partnered with NCR
- 10 community members
- 3 interactive workshops
- Collaborative online tool



Mental health recommendation summary

These recommendations are holistic and focus on each phase of a call for service



**MH #1: Dispatch MHP/EMT
teams to EDP calls via 911 -
PILOT**

Dispatch MHP/EMT teams to EDP calls via 911

- **Pilot**
- **Goal:** The goal of this program is to give people experiencing a mental health crisis an alternative to police that can properly assess their needs, provides appropriate care/support while avoiding unnecessary hospitalization and criminalization.
- **Design:** A mobile crisis intervention program that will dispatch a pair consisting of a mental health professional and an EMT to respond to mental health calls that don't involve weapons or pose no threat of violence towards others.
- **Critical factors:**
 - The team will respond unarmed, dressed down and with a van full of supplies to address the immediate needs of the person in crisis.
 - The responders will have extensive training on mental health crisis interventions, de-escalation tactics, and will be trauma informed. Teams will also need to be diverse in race and gender identity to best serve cultural populations.
 - The team will be able to respond to mental health crisis quickly while providing counseling, medical support and connecting people in crisis to community support services.
 - The program will be a community-based response that is empathetic and treats people experiencing crises as people who needs help and not as criminals.

Dispatch MHP/EMT teams to EDP calls via 911



Cost: \$450,000 - \$600,000

- This includes personnel & equipment for 2 teams MHP/EMT teams responding during a 10am – 6pm shift. It is dependent what supplies that van is stocked with, how many shifts we would want to pilot, and the number of teams per shift.



Timing (from passage of 2021 budget):

- Planning: 3-4 months, mostly to find the appropriate partners and staff up to accommodate pilot workload.
- Pilot: 4-6 months – this would allow for multiple adjustments throughout
- Analysis: 1-2 months
- Council Update: Report to Council in November 2021



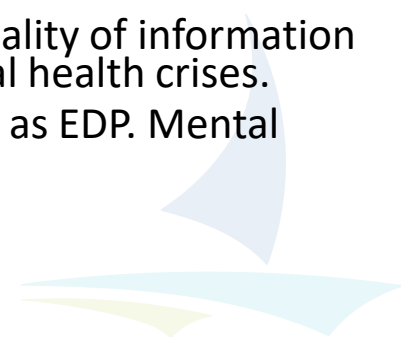
Considerations

- The survey, and anecdote, indicates that mental health calls today are underreported. Current incident volumes may not be a reliable baseline to indicate future workload volumes.
- Many potential partners should be considered for the pilot, including the county and community-based providers.
- Operating departments may be understaffed today due to budget shortfalls

**MH #2: Train 911 dispatchers in
assessing MH calls – PILOT**

Train 911 dispatchers in assessing MH calls

- **Pilot**
- **Goal:** Equip 911 call takers & dispatchers with tools needed to assess mental health calls so that they may dispatch the most appropriate response option and provide responders with high quality information as it relates to mental health and behavioral issues.
- **Design:** During the pilot, a portion of 911 call takers/dispatchers/supervisors would be trained in emergency mental health dispatching. Their experience would then be evaluated prior to training all dispatchers/supervisors. The training would be facilitated by a third party.
- **Critical factors:**
 - Emergency dispatchers are often the first point of contact when a caller is experiencing a mental health crisis.
 - According to NAMI – California, increased training for 911 dispatchers will improve the quality of information provided to responders and help alert responders to special circumstances, such as mental health crises.
 - Increased mental health training may also support call codes other than those designated as EDP. Mental health factors may also be relevant to other call types.



Train 911 dispatchers in assessing MH calls



Cost: \$50,000 – \$75,000

- This includes online training registration fees and staff coordination time. It is dependent on the number of 911 staff trained.



Timing (from passage of 2021 budget):

Planning: 2-4 months – determine logistics of training and create training schedule

Pilot: 4-5 months – 911 staff would be trained during this time. Training would be staggered to avoid service interruptions

Analysis: 1-2 months

Council Update: Report to Council in November 2021



Considerations:

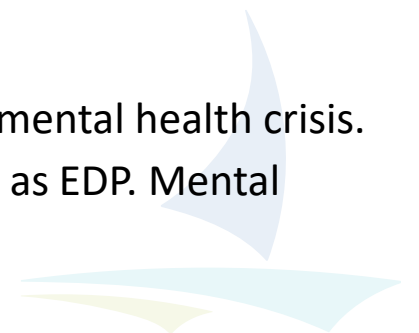
With additional training, it may be that 911 call takers & dispatchers are able to recognize more mental health related incidents, increasing the volume of EDP calls that may have previously received a different call code (ex. Suspicious person, unwanted person). This could have implications for the demand of the mobile crisis team.



MH #3: Embed MHPs in 911 – PILOT

Embed MHPs in 911 - PILOT

- **Pilot**
- **Goal:** Divert 911 mental health calls from MPD by identifying appropriate resources for the person in crisis. The Resident MHP may also be able to provide training to 911 call takers & dispatched allowing for improved triage on a broader scale.
- **Design:** Two mental health professionals will be embedded in 911. The mental health professionals will work closely with call takers & dispatchers to help improve mental health triage, divert calls from MPD, and identify the most appropriate response for mental health calls.
- **Critical factors:**
 - Emergency dispatchers are often the first point of contact when a caller is experiencing a mental health crisis.
 - Increased mental health training may also support call codes other than those designated as EDP. Mental health factors may also be relevant to other call types.



Embed MHPs in 911 – PILOT



Cost: \$205,000 – \$610,000

- This includes Personnel & Equipment Costs. This is dependent on how many shifts would be covered and the number of MHPs per shift.



Timing (from passage of 2021 budget):

- Planning: 3-4 months, mostly to find the appropriate partners and staff up to accommodate pilot workload.
- Pilot: 4-6 months – this would allow for multiple adjustments throughout
- Analysis: 1-2 months
- Council Update: Report to Council in November 2021



Considerations

- The survey, and anecdote, indicates that mental health calls today are underreported. Current incident volumes may not be a reliable baseline to indicate future workload volumes.
- Many potential partners should be considered for the pilot, including the county and community-based providers.
- Operating departments may be understaffed today due to budget shortfalls



**MH #4: Proactive de-escalation
within the community through
education & training – PILOT**

Proactive de-escalation within the community through education & training

- **Pilot**
- **Goal:** Provide community members with skills to help them recognize signs of a crisis and provide a basic level of support to the person experiencing it.
- **Design:** This pilot would be a train the trainer model with a micro grant. Community leaders complete Question, Persuade, Refer (QPR) and/or Mental Health First Aid training then receive a micro grant to train their community.
- **Critical factors:**
 - Community leader is defined broadly. Includes informal community leaders who are doing the work now (may not be a part of an established organization), nonprofit leaders, NBO leaders, etc.
 - The City does not control the content of the training. It is delivered by a third party.
 - The City funds and manages the micro grant
 - Trainers are paid through the micro grant



Proactive de-escalation within the community through education & training



Cost: \$90,000 - \$110,000

- This includes training fees for community leaders, funding for micro grants, potential space, and staff time to manage programming. It is dependent on the number of community leaders trained, the type of training, and amount(s) of micro grants.



Timing (from passage of 2021 budget):

Planning: 3-4 months, identify community leaders, develop micro grant terms

Pilot: 4-6 months – community leaders are trained and begin recruitment of community members

Analysis: 1-2 months

Council Update: Report to Council in November 2021



Considerations:

May be difficult to train enough community members to measure a considerable impact in call volume. Calls could decrease because community can better support each other during crisis. Calls could also remain level or increase as community becomes aware of the new MHP/EMT mobile crisis teams and feel more confident calling 911.





Reporting Recommendations

Reporting recommendation summary

- Report-only calls were selected because they are a relatively high volume of calls but tend to be low-risk
- Some recommendations that arose out of prototyping could move directly to implementation

Implement

- Transfer calls 311 is already taking from MPD to 311
- Comprehensive online reporting system
- Awareness campaign

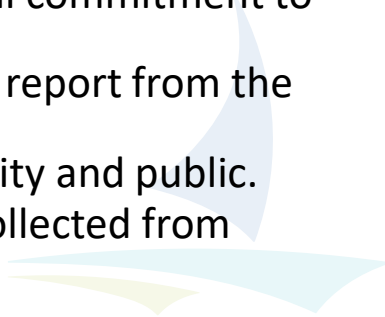
Pilot

- Train non-police staff to take low-risk reports & collect evidence
- Transfer parking problems to traffic control



**R #1: Direct property damage report-
only & parking problem calls to 311 –
IMPLEMENT**

Direct property damage report-only & parking problem calls to 311

- **Implement**
 - **Goal:** The goal of this process change is to **decrease the call volume to 911** of report-only and parking problem calls because these incidents do not require an in-person or emergency response; thereby saving time and resources for more urgent incidents.
 - **Design:** 911 dispatchers will transfer report-only and parking problem calls generated from the community to 311 agents who will handle the situation with the community member with care and empathy in an efficient matter.
 - **Critical factors:**
 - 311 agents are customer service representatives for the City and work under a professional commitment to ensuring a high level of empathy and understanding when communicating with the public.
 - 311 agents will inform public about the updated process and procedure with receiving the report from the caller, manage response, and track record till closure.
 - Residents can track their report online ensuring transparency in the system between the City and public.
 - 311 agents speak multiple languages thereby ensuring proper information is shared and collected from residents.
- 

Direct property damage report-only & parking problem calls to 311



Cost: \$265,000 – \$500,000

- This includes estimates for hiring additional 311 staff (salary, benefits, and technology set up) and the potential of adding additional space.



Timing (from passage of 2021 budget):

- Planning: 4-6 months to hire additional agents and train staff on call handling
- Analysis: 1-2 months to monitor call volumes in 911 and 311
- Council Update: Report to Council in November 2021



Considerations:

- 311 agents are not specialized in any one call type; they handle a wide variety of calls.
- Incidents to 911 may be underreported. Therefore, given this new policy we may see incident reporting to 311 increase



R #2: Create one comprehensive online reporting system - IMPLEMENT

Create one comprehensive online reporting system

- **Implement**
- **Goal:** Provide residents with a simple, efficient, and accessible online reporting system.
- **Design:** Combine the 311 and police online reporting systems into one system that receives reports for all non-emergency issues/crimes. Reports are then funneled to the appropriate department on the back end. This would be managed by 311.
- **Critical factors:**
 - Includes all non-violent issues / crimes
 - Is user-friendly and accessible (translated to multiple languages and works with screen readers)
 - Has a status tracker to provide transparency (tracking issue resolution / case status)
 - Documentation is viable for insurance purposes



Create one comprehensive online reporting system



Cost: \$600,000 - \$1,000,000

- This includes content development, front-end integration, and back-end integration. It is dependent on what systems are needed to update the websites.



Timing (from passage of 2021 budget):

Planning: 3-5 months, develop implementation plan to identify process changes and begin building system

Implementation: 6-10 months – build out comprehensive system

Council Update: Report to Council in November 2021



Considerations:

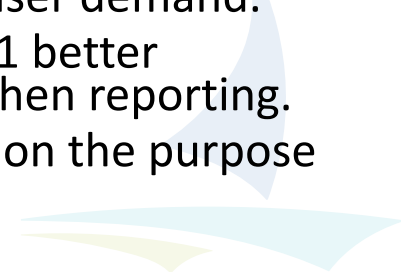
Residents would still like an option for an in-person response.

Back-end protocols would need to be evaluated to ensure alignment with an online tracking system.

**R #3: Conduct an awareness campaign
about reporting options via 311 –
IMPLEMENT**

Conduct an awareness campaign about reporting options via 311

- **Implement**
- **Goal:** Educate Minneapolis residents on the types of incidents handled by 311 so they are knowledgeable about their options.
- **Design:** 311 works with the Office of Performance & Innovation (OPI) and Communications to establish an awareness campaign that leverages behavioral science to inform residents on when to use 311 for their non-emergency crime incidents.
- **Critical factors:**
 - Monitoring usage rates of each reporting method for 311 (phone, online form, smartphone app, text) by incident type will help to inform the communication strategy based on user demand.
 - Ongoing evaluation of communication language written and spoken will help 311 better understand which messages influence resident behavior and impact residents when reporting.
 - Messages can be framed specifically for types of calls or more generally focused on the purpose and process of contacting 311.



Conduct an awareness campaign about reporting options via 311



Cost: \$40,000 - \$60,000

- This includes development of a citywide communications strategy to include a variety of outreach methods tailored to priority populations.



Timing (from passage of 2021 budget):

- Planning: 1-2 months to develop the campaign strategy, timeline, and messages for each media platform
- Implementation: 5-6 months of ongoing communication via multiple media outlets with built-in evaluation
- Analysis: 1-2 months
- Council Update: Report to Council in November 2021



Considerations:

- End user engagement will help to identify the specific communication strategies for specific cultural communities to ensure all Minneapolis residents are educated about their reporting options to 311.
- Findings from campaign will develop a blueprint for future initiatives if additional call types are given to 311.



R #4: Train non-police City staff to take theft & property damage reports and collect evidence – PILOT

Train non-police City staff to take theft & property damage reports and collect evidence

- **Pilot**
- **Goal:** Provide residents with an in-person response option to assist with taking theft & property damage reports. This will also help free up MPD time.
- **Design:** This pilot will involve sending out a city employee who is a non-sworn officer, to take reports from Minneapolis residents. This responsibility could be rolled into an existing position or become a new one.
- **Critical factors:**
 - Extra-mile customer service when taking reports
 - Ability to respond within a reasonable time frame (quick response)
 - Ability to properly collect evidence



Train non-police City staff to take theft & property damage reports and collect evidence



Cost: \$150,000 - \$445,000

- This includes staff time (either current or 1-3 new FTEs), equipment, & materials. This is dependent on what department this position lands in.



Timing (from passage of 2021 budget):

- Planning: 3-4 months, mostly to find the appropriate partners and staff up to accommodate pilot workload.
- Pilot: 4-6 months – this would allow for multiple adjustments throughout
- Analysis: 1-2 months
- Council Update: Report to Council in November 2021



Considerations:

We will need to make determinations of where this position will live and what their specific roles and responsibilities will be. This may be a new position, which does not currently exist in the City of Minneapolis, or may be rolled into a current position.

Need to determine legal factors surrounding who can be trained to collect evidence.



R #5: Transfer all parking related call responses to Traffic Control – PILOT

Transfer all parking related call responses to Traffic Control

- **Pilot**
- **Goal:** The goal of this pilot is to free up MPD time and resources spent on parking problem calls. This will also help reduce duplicative services in the City.
- **Design:** This pilot would involve expanding the operating hours of Regulatory Services' Traffic Control agents. This could come in form of expanding shifts with current staff or adding new positions.
- **Critical factors:**
 - Extra-mile customer service
 - Ability to respond within a reasonable time frame (quick response)
 - Resolution of the parking issue



Transfer all parking related call responses to Traffic Control



Cost: \$150,000 - \$445,000

- This includes staff time (supervisor(s) and either current or new FTEs), equipment, & materials. This is dependent on logistics of the pilot.
- These costs are dependent on Traffic Controls Operational Hours



Timing (from passage of 2021 budget):

- Planning: 3-4 months, mostly to find the appropriate partners and staff up to accommodate pilot workload.
- Pilot: 4-6 months – this would allow for multiple adjustments throughout
- Analysis: 1-2 months
- Council Update: Report to Council in November 2021



Considerations:

Traffic control's operating hours are limited.

Reg Services currently responds to parking related calls from 7:30am – 6pm. Transferring all parking related from MPD to regulatory services would increase the volume of calls they currently handle.



City of Minneapolis 911/MPD Workgroup Final Recommendations

Public Health & Safety Committee

Thank you

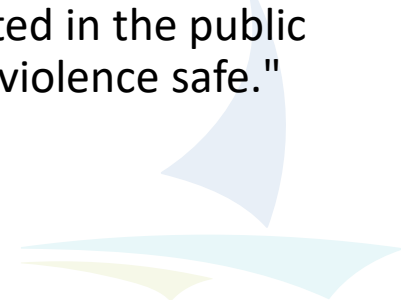
November 5, 2020



Appendix

Racial Equity Impact Analysis (REIA)

- The impacts of these recommendations will be citywide as MPD will have increased capacity to respond to urgent matters most specialized to their skillset.
- On July 17, 2020, City Council approved a resolution declaring racism a public health emergency. According to the resolution, "research has shown that police killings of unarmed Black Americans have adverse effects on mental health among Black American adults overall, and... studies show that Black people are three times as likely to be killed by police as white people in this country." In addition to the disproportionate amount of police harm experienced by BIPOC communities, data supports that people with mental illness experience higher rates of police violence, as well.
- BIPOC communities across the city will likely see reduced interactions with police as alternate responders become available to respond to mental health crisis calls for service and reporting non-emergency incidents becomes more accessible.
- The recommendations also support an aim of the resolution to "[b]uild and implement a comprehensive public safety system that decentralizes BIPOC over-policing and criminalization and is rooted in the public health approach to keep BIPOC communities disproportionately impacted by community violence safe."

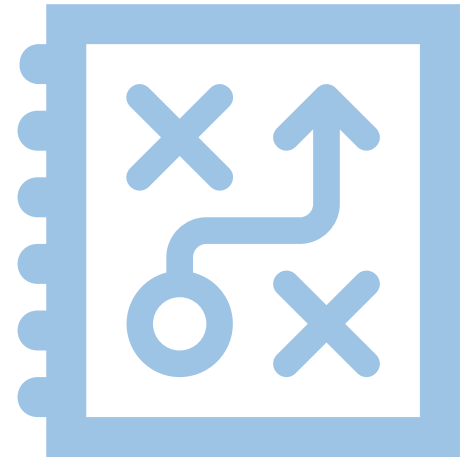


Transition Theft Report-Only calls and response to 311



Contents

- Background (Staff Directions)
- Project Overview
- What we've done (Process Overview)
- Implementation Plan
- General Constraints
- Questions & Appendix



Staff Direction – August 2020

Directing the City Coordinator's Office of Performance & Innovation to lead, in collaboration with the appropriate City departments and divisions, continuing work to implement recommendations identified by the 911/MPD Work Group in its November 2019 report; specifically:

- Organizing, developing, and leading a plan to transition Theft Report-Only calls and response to 311 by December 1, 2020. A progress report on this plan should be presented to the City Council or its appropriate standing committee by October 1, 2020.

Project Overview

- 911 & 311 currently receives Theft Report Only calls from Minneapolis residents
- MPD & 311 respond to Theft Report Only calls and take reports
- The new system for Theft Report Only calls will take the responsibility of Theft Report intakes away from 911 & Police and place that responsibility solely within 311 with some exceptions (Burglaries & Weapons)
- The most significant change in 311's current process will be an increase in volume

Key Stakeholders

- Minneapolis Residents
- 311
- 911
- MPD

Project Team

- Office of Performance and Innovation
- 311
- 911
- Minneapolis Police Department (MPD)

Goal

- Develop a plan to transition Theft Report only calls to 311

Outcome

- Reduce the time MPD spends responding to calls
- Create efficiencies and reduce duplicative services in the city

What We Have Done

OPI	311	911	MPD	Project Team (OPI, 311, 911, MPD, Andrea Larson, Greta Bergstrom)
<ul style="list-style-type: none">Developed a template to guide 311,911,MPD the development of the implementation planManagement and organization of project team and implementation plan	Completed the implementation plan template, by providing information on major tasks and resources needed for a successful transition	Provided information on technical/process changes and requirements for MPD	Provided information on technical/process changes and requirements for MPD	Completed & reviewed the implementation plan

Implementation Plan

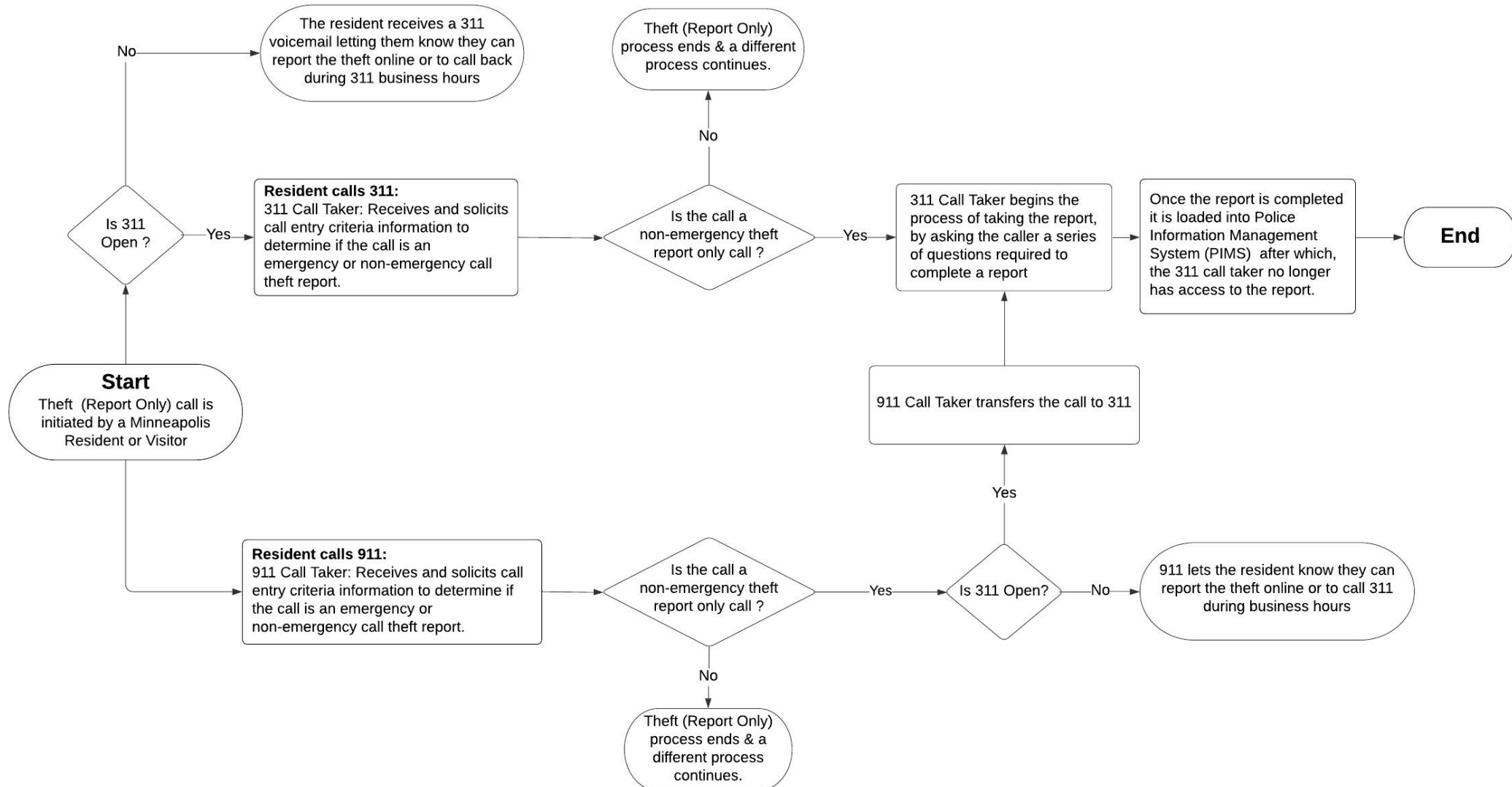
New Theft Report Only Process

Major Tasks

Implementation Schedule

Implementation Support

New Theft Report Only Process



Major Tasks & Implementation Schedule

Task	Start Date	End Date	Duration (Months)	Key Personnel Responsible
Moving into new building	Dec 2020	Dec 2020	1	Trish, Kathy Wagner, Greg Goeke, Cindy Dillahunt, Dave Roth, and Co.
Hiring new 311 agents	Nov 2020	Jan 2021	3	Trish, HR, 311 Supervisor, 311 Training Analysts
Purchasing and setting up new equipment	Oct 2020	Jan 2021	3	Trish, IT
Training new 311 staff	Jan 2021	May 2021	4-5	Trish, Rebecca Sandell & Dan Mills
Updating 311 Theft Reporting procedure	Jan 2021	Mar 2021	3	Trish, Rebecca Sandell, Diane Nelson
Developing language to explain changes to Minneapolis Residents	Oct 2020	Mar 2021	3	Trish, OPI, Rebecca Sandell, Dan Mills, Diane Nelson, Communications
Public Education Campaign for Non-Emergency Calls	TBD, 2021	TBD, 2021	-	311, Communications, OPI, NCR
MECC Dispatchers (911) transfer theft report calls to 311 - 911	May 2021	Ongoing	-	911
Modification of the Online Reporting	TBD, 2021	TBD,2021	-	311, MPD, IT

General Constraints

1. 311s limited access to PIMS: 311 can access PIMS to fill out reports and add additional information to a report, however, 311 cannot view a report or make changes to the report once it is entered PIMS. They will need additional access to PIMS for thorough reporting.
2. Accessibility of Reporting Options e.g. in-person responses vs phone/online.

Next Steps



Questions



Department PNC Review Update

Public Health & Safety Committee

Presented by the Office of Performance & Innovation

November 5, 2020

Regulatory Services

Survey 1

- Based on your Dept competencies, could your Dept respond to this PNC
- Which of the current services/programs/resources could you use to take on this work?
- How soon can your dept take on this work?

Survey 2

- At your current service level (CSL), how much of this work can your dept take on?
- With additional resources/funding how could your response capacity increase?
- What additional resources/funding would your dept need to respond, if any?
- Operational or functional considerations

PNC Summary

- Number of PNCs w. police response: 139
- Number of PNCs Depts believe they could potentially respond to: 10 (based on responses)
- Number of MPD Incidents for the 10 PNCs in 2019: 31924 OR 10.4%
 - Yes with Additional resources
 - 7084 or 2.3% of total MPD Incidents in 2019
 - Possibly but additional analysis is needed
 - 24844 OR 8.1% of total MPD incidents in 2019
- The 911/MPD working group is recommending all “Report Only” PNCs be directly responded to by 311
- Currently no Departments can take on direct response in 2020
- Animal Care + Control PNCs may be able to be implemented in 2021, pending additional resources and associated implementation plans
- Fulltime direct response of other PNCs remains dependent on further analysis. Any relevant implementation may take place as early as 2022 if additional resources are allocated.

Regulatory Services

Yes Available with additional resources	<ul style="list-style-type: none">• Parking Problem (PKG) – recommended pilot in 2021• Animal Bite (ABITE)• Aggressive Dog (ADOG)• Animal Call (AC)• Animal Fight (ANFIGHT) – in conjunction with MPD
Possibly Additional analysis needed	<ul style="list-style-type: none">• Check Hazard (CKHAZ)• Assist Fire Personnel (AFP)• Business Check (BIZCK)• Property Damage Accident (PD)• Property Damage/Hit and Run (PDHR)
No Out of Scope	<ul style="list-style-type: none">• Suspicious Vehicle (SUSPV)

Regulatory Services

	Definition	MPD Response	Chameleon Data (2019)	Department Response
Animal Bite	(ABITE) – A bite, which breaks the skin, and was caused by the teeth of any animal.	<ul style="list-style-type: none"> • Priority 1 • 1 Officer Response 	<ul style="list-style-type: none"> • 379 total (292 regular + 87 on-call) 	<ul style="list-style-type: none"> • Animal Care + Control responds to these calls during full operational hours and, in conjunction with MPD, during on-call hours • With additional staff, the department is prepared to assume responsibility for these calls
Aggressive Dog	(ADOG) – One or more unconfined dogs displaying aggressive behavior towards a person or animal and the people or animals are unable to leave to a safe area.	<ul style="list-style-type: none"> • Priority 1 • 1 Officer Response 	<ul style="list-style-type: none"> • 178 total (163 regular + 15 on-call) 	
Animal Call	(AC) – Police Dispatchers use this code to onsite an Animal Control Officer (ACO) when [there is an animal-related call that is not categorized as a bite, aggressive dog or fight].	<ul style="list-style-type: none"> • Priority – 3 • Animal Control Response 	<ul style="list-style-type: none"> • 145 total (111 regular + 34 on-call) 	
Animal Fight	(ANFIGHT) – Promotes, engages in, or is employed in the activity of cockfighting, dog fighting, or violent pitting of one pet or companion animal against another of the same or different kind. Intentionally causing unnecessary pain, injury, suffering, or harassment to a pet or companion animal.	<ul style="list-style-type: none"> • Priority – 1 • 2 Officer Response 		<ul style="list-style-type: none"> • Animal Care + Control responds to these calls in conjunction with MPD • Due to the felony nature of the call, the two teams would continue to address calls together



Department PNC Review Update

Public Health & Safety Committee

Thank you

November 5, 2020